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R. HUNT

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: 1216 Capital LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and feets) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gregory Matthew Klimczak

Name of Person

1216 Capital LLC

Firm/Company

2454 N McMullen Booth Road, Suite 700

Address

Clearwater, FL 33759

City/State and Zip Code

contact@1216capital.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gregory Matthew Klimczak 607-1918 847 at (Area Code & Daytime Telephone Number Name of Person Street Address: Mailing Address: **Registration Section Registration Section** Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303 Enclosed is a check for the following amount:

🛛 \$25 Filing Fee

\$55 Filing Fee & Certified Copy

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PH 1:00

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

.

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	ame of the limited liability company: <u>1216 Capita</u>	il LLC		
2. (a١	2454 N McMullen Booth Road, STE 700	(b)	2454 N McMullen Booth Road, STE 700	
(,	Principal office address of limited liability company: (<u>Note: MUST BE STREET (DDRESS</u>)		Mailing address of limited liability company: (<u>Note: MAY BE POST OFFICE BON</u>)	
		Clearwater, FL 33759		Clearwater, FL 33759	
	•				
		07/05/2022		1.22000300218	
3.		Date of filing/registration in Florida	4.	Document number	
5. 0	(ล)	Klimczak, Gregory M			
	()	Registered Agent and Registered Office shown on the records	of the Florida D	Dept. of State:	
		2255 Highland Woods Drive			
		Registered Office Address (MUST BE FLORIDA STREE	TADDRESS ₁	·	
		Dunedin	FL34698		
(b)	Klimezak, Gregory M	<i></i>		
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			
		2454 N McMullen Booth Road		SSEE. FL	
		NEW Registered Office Address:		O m	
		STE 700			
		Clearwater	FL <u>33759</u>	·	
chai ager was the i Signal <i>I he</i> <i>prov</i> <i>the</i> i	nge nt v /we arti gna //rei visi visi	imited liability company is not organized under the or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member cles of organization or the operating agreement of the ment a flering or authorized representative of a member by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as provide by reflect a change in the registered office address, by reflect a change in the registered office address, by writing of this change.	he registered liability com s of the limited he limited lial Greg	office and the business office of the registered apany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in bility company. gory Matthew Klimezak Printed or typed name of signee a this canacity. I further agree to comply with the	

Signature of Hogis Ged Agent

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25,00